

Jan: 14<sup>th</sup> 1829  
55 South 7<sup>th</sup>.

Dr. Loe

No 107

An Essay  
on

very good -

Epilepsy

Read March 1829

Submitted to the Medical Faculty

of the  
University of Pennsylvania

For the degree of Doctor of Medicine  
by John G. Williamson  
of  
Virginia

March 1829

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The above is a list of the names of the persons who have been admitted to the membership of the Society since the last meeting. The names are given in alphabetical order, and the date of admission is given in parentheses. The names are given in full, and the date of admission is given in full. The names are given in full, and the date of admission is given in full.

John A. Smith (1880)  
John B. Smith (1881)  
John C. Smith (1882)  
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John M. Smith (1892)  
John N. Smith (1893)  
John O. Smith (1894)  
John P. Smith (1895)  
John Q. Smith (1896)  
John R. Smith (1897)  
John S. Smith (1898)  
John T. Smith (1899)  
John U. Smith (1900)

## Epilepsy

This disease on account of its violent symptoms, the obscurity of its nature, and the great difficulty of its cure, has from the earliest times excited the most intense interest among practitioners of Medicine; and much of this attention has always been bestowed upon the investigation of its nature and cause. Notwithstanding however the great attention which it has always received, its nature is yet far from being well understood -

Little more therefore can be expected in a paper like this, than an accurate delineation of its principal and characteristic features, some notice of the latest and most approved views which have been taken of the Causes which produce it - and an enumeration of the remedial means which have been found most effectual in preventing and curing this formidable disease.

A great variety of names have been given to it, some

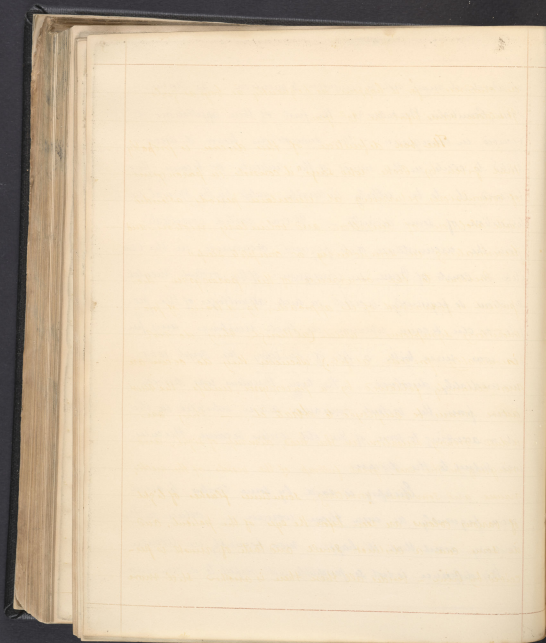




of which, it may not be improper to mention - as *Mortus* - *Lacus*, *Comitialis*, *Herculeus* &c. the first of these appellations it received in consequence of the superstitious horror it never failed to excite in the minds of the Antients, or because they believed it to be utterly incurable unless by the special interposition of some divinity - It was called *comitialis* from the circumstance of its frequent occurrence, in the *Comitia* or Courts of Rome, in consequence of the violent mental emotions so frequently excited in such assemblages of the people; or else because whenever in such meetings any person was seized with a fit of Epilepsy, the Court was immediately dissolved. The term *Herculeus* was derived either from the violent muscular action exhibited in the fit or according to some of the old Writers because *Hercules* was subject to the disease.

Epilepsy is said by some Writers to occur more frequently in men than women - others on the contrary assert that it happens more frequently in women.

This difference is not so perceptible with respect to its occurrence



in children - for it happens as frequently in boys as girls  
It seldom occurs before the 20<sup>th</sup> year

The best definition of this disease is probably  
that given by Cooke who says "it consists in paroxysms  
of convulsions, returning at uncertain periods, attended  
with abolition of sensation and voluntary motion and  
terminating in somnolency or complete sleep."

Previous to the occurrence of the paroxysm, the  
patient is forewarned of its approach, by a train of pre-  
monitory symptoms - which (although they do not  
invariably precede it, yet) whenever they do occur are  
most certainly followed by a paroxysm, unless the most  
active means be employed to abate it. - They are  
a dull drowsy sensation in the head, dimness of sight, and  
ringing in the ears, great fullness of the vessels of the neck,  
nausea and sometimes vomiting, sometimes flashes of light  
of various colours are seen before the eyes of the patient, and  
in some cases a distinct smell and taste of smoke is per-  
ceived by him - besides all these there is another still more



remarkable, it is the *Aura Epileptica*. or a sensation very much resembling that produced by the application of a stream of cold air, or cold water to any part of the body, by some patients it has been described as resembling the creeping of insects over the surface of a part. and hence it has been called formication; it generally commences at one of the extremities and advances towards the head, where it has no sooner arrived than the paroxysm commences; there is however no organ or portion of the body from which it has not been known to emanate.

The cause of this very singular phenomenon has never been satisfactorily explained; it is however supposed to arise from the direct application of stimuli to the nerve, and that the impression thus produced is propagated along the nerve to the brain; but the sensation is not found to observe the course of the nerve but rather to pass along the integuments.

Sometimes the disease comes on without being preceded by any of the above mentioned symptoms, in such



Cases the patient is suddenly deprived of all sensation and voluntary motion, his senses cannot be aroused by the strongest stimuli - involuntary muscular action takes place with great violence, and the patient generally remains wholly insensible during the whole paroxysm.

During the convulsions the chin is drawn violently forward upon the breast, or the head is thrown backwards with prodigious force; the eye rolls furiously in every direction, the lips are convulsed and covered with a frothy saliva, the face is either pale, or flushed and livid almost to blackness, the muscles of the jaw contract violently, the tongue is thrust forth between the teeth and frequently dreadfully lacerates; These muscles of the face, by the contractions of which the several passions are expressed, being irregularly convulsed give to the features an inexpressibly wild, and almost supernatural expression;

The Respiration is much disturbed, being difficult, laborious, and sometimes stertorous - The circulation is always more or less disturbed during the paroxysm, the heart palpitates violently, and the pulse is very irregular, in the beginning of





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The fit the pulse is generally small and quick, towards its termination it is fuller, slower, and weaker, throughout the whole paroxysm extremely irregular.

Muscular action differs in violence at different times.

So powerful are the contractions of the muscles of the jaws that dislocation frequently takes place. and some instances are recorded when the teeth have been broken - Sometimes only a portion of the muscles are affected, and in almost every case the muscles on one side are observed to be more affected than those on the other: - The symptoms at first described, after continuing sometime gradually abate, the convulsions become less frequent, and less forcible, the pulse slower and fuller and more regular, the breathing free and less laborious and the patient becomes composed, or sinks into a state of somnolency or complete sleep. - upon awaking, he feels a sensation of languor, and is much fatigued with the great exertions in which his muscles have been engaged.

The above description is only applicable to the disease in its most aggravated form; most frequently it is of a much milder

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nature, the patient being suddenly deprived of sensation and voluntary motion: convulsed for a few minutes after which the fit goes off, and he arises, feeling a sensation of languor, and is perfectly unconscious of what has occurred.

The fit is of longer or shorter duration in different cases, sometimes lasting not more than ten or 15 minutes at other times several hours, and in some instances it has been known to continue for 10 or 14 hours, in such cases however, the spasmodic action is in a moderate degree.

There is generally no regularity observable in the recurrence of the paroxysms of Epilepsy; some cases however are related of it observing the law of periodicity - and to have returned every day, every month, or even at <sup>certain</sup> ~~fixed~~ states of the moon, and in some instances after a lapse of several years.

The terminations of Epilepsy are various, depending much on the degree of violence and also the duration of the fits.

The patient frequently remains, languid, dejected, & torpid, his digestive organs suffer some derangement, and his mental faculties are impaired and he sinks into a state of fatuity or idiocy; not



unfrequently it terminates in paralytic affection of some of the nerves, more particularly those appropriated to vision and hearing, and we have as a result blindness or deafness.

Post mortem examinations exhibit the following appearances: There is perhaps no organ of the body which has not been found changed at different times, by this disease, but the brain is that in which the inroads of the disease may be most frequently, and most clearly traced. — and this organ is found variously affected, sometimes in its substance, sometimes in its membranes, by causes which seem to act mechanically upon it, as exostoses, tumours, spicula of bone, effusions extravasations &c.

A very common appearance is an accumulation of fluid of different colours and consistence, <sup>within</sup> the ventricles of the brain, sometimes we meet with a malconformation of the bones of the cranium, at others a preternatural hardness or softness of the substance of the brain: Such are the appearances which have been most frequently observed, by those who have paid attention to the subject. — within a few years however new lights have been thrown upon this subject, by many of the

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European ~~Pathologists~~ among whom, those of M. Wenzel are perhaps most worthy of attention. he gives us the following facts as the result of numerous dissections, of the brains of epileptics. he says, the cerebrum or brain properly so called, which was the part in which the disease has been hitherto believed to be located, he seldom found in a diseased condition. and that the parts within the cranium which were most frequently found in an altered state were the ~~cerebrum~~<sup>cerebellum</sup> and the pineal gland. The former he found in every case changed in some way, either in its size, form, colour or consistence; its colour differed from a dusky red, to a dark red or black hue, at other times it was found of a greyish or yellowish tinge.

Its consistence was almost invariably harder and firmer than in a natural state - its size was seldom diminished, but sometimes enormously enlarged. the most remarkable change observable in it was a collection of fluid of different colours within its substance - its external surface almost invariably exhibited marks of inflammation.

The pineal gland he found variously altered either with respect to its size form colour or consistence, it was usually much smaller

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and always of a softer consistence than in its natural state.

The causes of this disease are very various, and their mode of action little understood; many superstitious and ridiculous notions were formerly entertained respecting this complaint in former times; thus it was attributed to the influence of the stars, the moon, and other heavenly bodies, and also to that of Malignant or unclean spirits.

Of the rational causes of Epilepsy that which first demands attention is the predisposing cause

This would seem to be a peculiar constitution of the system, which has been variously explained by writers, by none however in a very satisfactory manner; some indeed have denied the existence of any such constitution, for say they, it frequently occurs in perfectly healthy and well organized brains and nervous systems, independently of any such predisposition

Others who believed in the necessity of such predisposition ~~and~~ thought it consisted in a certain mobility, or irregularity of the brain and nerves: whether or not a predisposition be necessary to this disease certain it is, it occurs much more frequently in some than in other individuals - This predisposition whatever



it may consist in, is sometimes <sup>hereditary</sup> ~~hereditary~~ - and is frequently found to exist in whole families, sometimes lying dormant for one or more generations, and then revived in the next by the application of some of its exciting causes. Dr Cooke thinks that those persons who possess a delicate constitution combined with great sensibility are most liable to the disease, hence the temperament of genius is that in which it frequently occurs; many individuals of the highest order of genius have been troubled with it; as Rousseau, J. Cesar Mahomed &c.

Whatever may be the nature of the predisposition, it is manifestly increased by plethora

Habit has been enumerated among its exciting causes, and Van Swieten says that when the disease is excited by a very strong impression upon the system, a predisposition may be generated.

The exciting causes may with much propriety be divided into such as act directly upon the brain, and such as acting primarily upon some more remote part or organ, affect the brain indirectly

Under the first of these divisions may be ranked all those <sup>causes</sup> which seem to act mechanically, by compressing or stim-



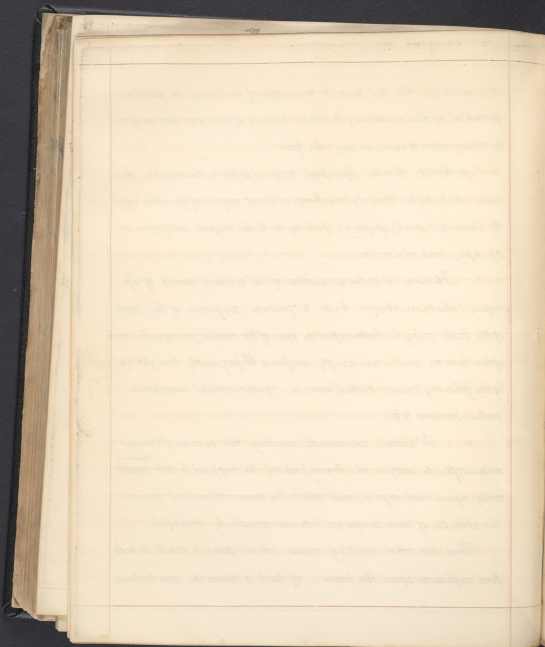
stimulating the substance or meninges of the brain, as malcon-  
-formation of the cranium, exostosis, spicula of bone &c also any can-  
ses acting upon a nerve in any other part.

M. Portal, thinks Epilepsy and Apoplexy convertible dis-  
-eases, and states that by making a great degree of pressure upon  
the brain we excite apoplexy, and by a lesser degree we produce  
Epilepsy and vice versa.

Plithora is stated as another of the exciting causes of Epi-  
-lepsy - whatever therefore tends to produce congestion of the vessels  
of the head may be looked upon as one of the exciting or remote cause  
of this disease, and accordingly we find it frequently brought on  
by the following causes, violent exercise, great mental emotions  
violent passions &c.

D\*Gallen enumerates among the exciting causes  
certain fluids within the brain, which he supposed to act <sup>chemi-</sup>~~that~~  
cally upon that organ, and which he terms chemical causes.  
The existence of such causes are however exceedingly doubtful

There are other exciting causes which seem to exert a seda-  
-tive influence upon the brain; of such a character are certain



depressing passions, as fear, terror, violent and sudden grief.  
indeed almost any powerful impression, of a disagreeable nature  
made upon the senses, will be productive of it in those in whom the  
predisposition is strong. - the most frequent of such causes are un-  
pleasant tastes, or odours, loud, harsh, discordant sounds, the sight  
of a person suffering under a paroxysm of the disease will often ex-  
cite it in others, more particularly where a strong predisposition to it  
exists. and even the bare recollection of a fit is said to have  
induced the disease

Injury done to the spinal marrow may also be  
considered as another cause. this has been made evident by recent  
dissections of M. Siquet of Paris - he further adds that irritation  
in any portion of the nervous system may occasion Epilepsy. and  
he relates an interesting case, in which it was brought on by the pres-  
sure of a cartilaginous body upon a portion of the Sciatic nerve,  
which, being removed, immediate relief was procured

The causes which affect the cerebral organ through the medium  
of other and more remote organs, may be stated to be, irritation of  
the stomach, or bowels, by ingesta, of an unwholesome acid or

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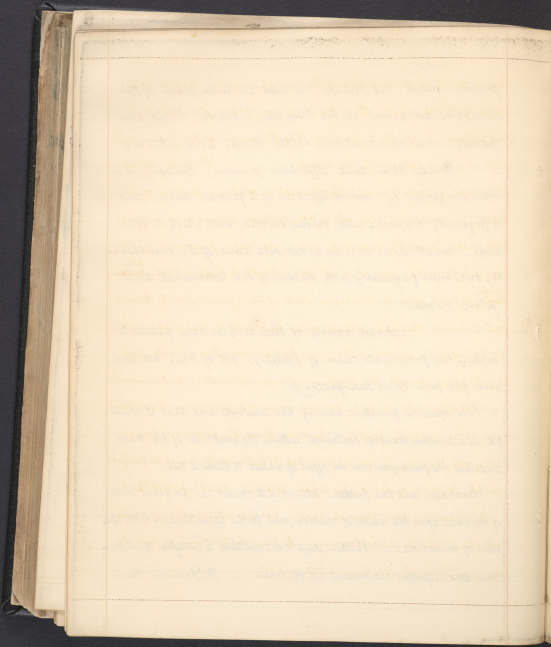
poisonous nature, but perhaps the most common causes of this discription are worms in the stomach, or bowels; and also calculous concretions, whether in the bladder liver or kidneys.

Besides then local affections producing Epilepsy, it is often brought on by morbid affections of a general nature, and is frequently connected with nervous disorders, with which it alternates - Sometimes too it is connected with some of the exanthemata, but more frequently with diseases of the abdominal and pelvic viscera.

A vast variety of theories have been framed to explain the proximate cause of Epilepsy; all of them are however far from being satisfactory.

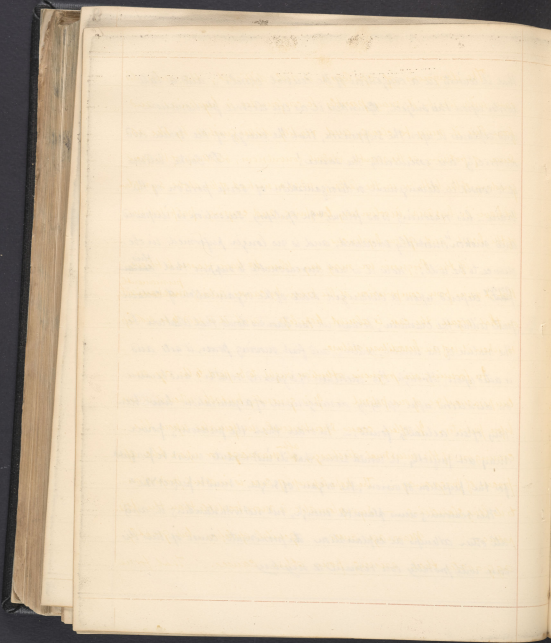
The opinion prevalent among the ancients, was that it consisted in a pituitous humor contained within the ventricles of the brain, and that the paroxysm, was an effort of nature to throw it out.

Barhaave and Van Swieten believed it to consist in too great action of the brain upon the nerves of motion, and at the same time too little upon those of sensation - Gallen says it is sometimes a collapse, and sometimes an improper excitement in the brain - Dr Johnson that



that it consists in a congestion of the cerebral vessels - and a late writer upon this subject, considers it as an electric phenomenon and explains it upon the supposition, that the energy of the brain and electricity are essentially the same! Dr Cooke believes it to consist in derangement or disorganization of some portion of the brain.. his reasoning is as follows, "In epilepsy, sensation is impaired, and motion<sup>s</sup> morbidly increased, and is no longer performed in obedience to the will; now it is not unreasonable to suppose that <sup>this</sup> ~~certain~~ <sup>may</sup> ~~part~~ depend upon a deranged state of the organization of certain parts within the cranium, because we can have no doubt that whatever be the nature of the sentient, willing, and first moving power, it acts and is acted upon, through the medium of organized matter; and because on dissection after epilepsy, derangement of organization have been very often actually found; - In order that the perceiving power may act perfectly, it would seem that its instruments must be perfect for the perfection of vision, the organ of sight must be perfect &c &c

This reasoning seems plausible enough, but notwithstanding it, and all other attempts at explanation the proximate cause of this disease will probably ever remain a mystery



The diagnosis of epilepsy is not difficult, the only disease with which it may possibly be confounded is hysteria, and from this it may be clearly and readily distinguished by the absence of frothing at the mouth, violent convulsions, blackness of the face, gnashing of the teeth &c in the latter; whereas instead of the above symptoms we have in hysteria involuntary laughing, and crying, palpitations of the heart, and globus hystericus.

Of the Prognosis we may say, when we have reason to believe that it arises from compression of the brain by causes acting <sup>permanently</sup> ~~mechanically~~ on that organ, the case is almost hopeless - and it is said to be so too, when it is of an hereditary nature.

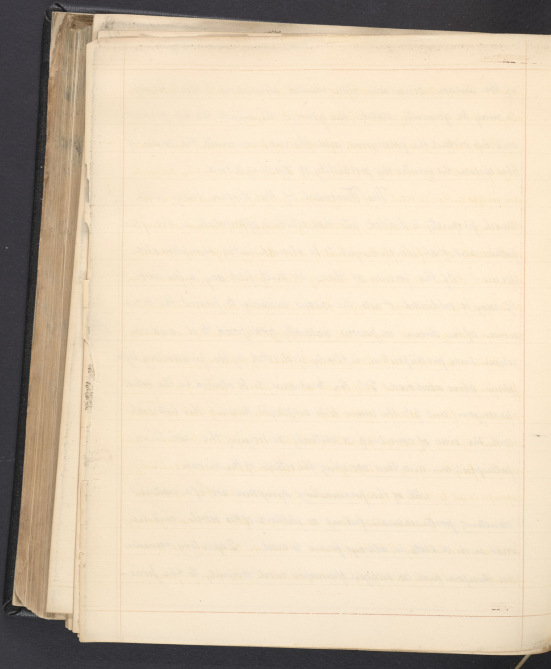
In forming our prognosis attention ought to be paid to the age, sex, temperament &c of our patient - It is generally tractable when it occurs before puberty. It often ceases spontaneously in females upon the coming on of the menstrual discharge, <sup>after</sup> marriage, or upon the approach of pregnancy - The hopelessness of cure is indeed proportion to its long standing - Symptomatic is more tractable than the idiopathic - Marriage cures genital epilepsy, but greatly aggravates that arising from other causes. That form



of the disease combined with mental alienation is utterly hopeless. it may be generally stated, the younger the subject, the less frequent, and less violent the paroxysms, and the more remote the cause of the disease, the greater the probability of effecting a cure

The Treatment of this disease may with much propriety be divided into that which is appropriate in the idiopathic, and that which ought to be observed in the symptomatic forms: Of the former of these we shall first say a few words. It may be subdivided 1<sup>st</sup> into the means necessary to prevent the occurrence of the disease in persons naturally predisposed to it, and in whom such predisposition is clearly indicated by the precursory symptoms above mentioned 2<sup>nd</sup> the treatment to be observed in the actual paroxysm, and 3<sup>rd</sup> the means to be employed during the interval with the view of correcting or entirely destroying the existing predisposition, and thus obviating the return of the disease

All of the precursory symptoms are of a nature denoting preternatural fullness or plethora of the vessels; and indeed such a state is always found to exist: Depletory remedies are therefore such as suggest themselves most obviously to the prac-





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-tious; nor is there a remedy of this class which has not been employed with advantage in this stage of Epilepsy.

Bloodletting as the most effectual of such means, has been highly extolled by many writers, and it has been urged by some to an incredible extent; of the general utility of venesection in this stage, there is no doubt, particularly when the disease occurs in individuals of a full plethoric habit, and strong vigorous constitution. Some recommend taking blood from the jugular vein, or to open the temporal artery; these measures are however, not without danger and must not be employed without great caution.

With a similar intention, namely that of reducing plethora, purging has also been employed at this period, with great advantage; those ~~cases~~ of this class which are characterized by <sup>the</sup> activity and speedy operation should be selected, in addition to these stimulating ~~phlegm~~ may be employed: these remedies are peculiarly appropriated to cases of epilepsy excited by worms in the intestines.

Emetics have been employed also advantageously, and we are told by Dr Chapman, that in cases of the complaint manifestly excited by gastric irritation, he has frequently



employed emetics with decided advantage, he says "by exhibiting them just before the accession of the paroxysms, they will often prevent it, and even if they fail in this respect they render it milder and of shorter duration" in addition to which he further adds "that it is only in gastric epilepsy that we may venture upon their employment, and that we should studiously avoid them in cases of the disease primarily seated in the brain, or where ~~there is~~ any great fullness of the vessels exist". Aura epileptica has been already mentioned as one of the most singular of the premonitory symptoms by some it has been looked upon rather as a cause than as a symptom.

When it arises at a distance from the head, it has been the practice from the earliest times, to apply a ligature upon the limb between, the place whence it proceeds, and the head, and this has been found pretty effectual, in procuring the fit so long as the liga<sup>ture</sup> ~~remains~~ remains - but by this means we cannot hope to effect a radical cure.

Of the treatment to be observed in the actual paroxysm, we ~~say~~<sup>need</sup> not say much. The ancient physicians believing that the disease arose from the action of morbid matter upon the system, and that the fit was an effort of nature to throw



it out - thought that such endeavours ought to be promoted and encouraged, which they accordingly did, by means of the most powerful stimulants. Blood letting has been practised by some during the fit, it would be found however exceedingly difficult to accomplish this, during the violent spasmodic contractions of nearly all the muscles of the body, and though we should be able to accomplish it, it is very well calculated (Says Hecsteden)"to diminish the strength of the patient, but not the power of the disease"

The plan most usually employed, is simply to lay the patient upon a bed, with his head somewhat elevated, and thus to suffer the fit to subside spontaneously, taking care that the patient does not injure himself. Some have proposed to lay hold on the patient and to endeavour by force, to reduce the spasmodic contractions of the muscles; but this practice is by no means admissible - it may be necessary to place some soft substance as a folded napkin or a bit of soft wood between the teeth to prevent the tongue from injury.

The treatment to be pursued in the interval next demands our attention; here our indications are



obviously Two fold, 1<sup>st</sup> to correct the predisposition to the disease and 2<sup>nd</sup> to diminish or remove the exciting causes: to answer the former of these indications we shall have to contend against two different and nearly opposite states of the system namely, plethora and debility; for the reduction of Plethora upon which the predisposition seems in many cases to depend Bleeding both general and local, purging, emetics, setons, issues, and low diet have been found very serviceable.

Blood-letting as the readiest method of emptying the vessels is undoubtedly the most valuable and effectual means for fulfilling this indication.

The concurrent testimony of the most distinguished physicians of all ages, affords ample evidence of the Superior efficacy of Venesection in Epilepsy. Numerous cases have been recorded where the accidental loss of large quantities of blood, has most effectually removed the disease.

Purgatives too have been employed with advantage in this stage of the complaint with regard to their utility however there is still some doubt - Some practitioners advise strongly

the only subject to be considered in the present  
case is the question of the validity of the  
claim of the plaintiff as to the right of the  
defendant to use the name of the plaintiff  
in connection with the business of the  
defendant. The plaintiff claims that the  
defendant has used the name of the plaintiff  
in connection with the business of the  
defendant in violation of the plaintiff's  
rights. The defendant claims that the  
plaintiff has no right to the name of the  
plaintiff in connection with the business  
of the defendant. The court has decided  
in favor of the plaintiff and has granted  
the plaintiff an injunction against the  
defendant from using the name of the  
plaintiff in connection with the business  
of the defendant.



the employment of the most drastic articles of this class; others prefer the milder kind or laxatives, whilst others again condemn their use altogether; perhaps, where the plethoric state is strongly marked, they may afford relief by their evacuant properties; but in cases of less emergency, they may produce too much excitement, by their stimulating effect upon the intestines and therefore in such cases ought to be discarded.

Enemas at this stage of the disease, are to say the least of them equivocal remedies.

The restoration of any discharges which are either natural to the system, or which by habit have become nearly so, as the menstrual discharge, hemorrhoids &c is always attended with salutary result, and should therefore in the treatment never be neglected.

With regard to the diet to be observed by the patient we may say generally - that every species of food which tends to the production of much blood should be carefully avoided.

We now come to the treatment of that form of the disease in question proceeding from and accompanied with



debility; here it is obvious that the depletory measures above mentioned would prove in the highest degree injurious, particularly Copius Venesection and active purging - even in this state of the system, should there exist any fullness of the vessels of the head topical depletion should be resorted to, regardless of the existing debility: the bowels at the same time should be kept in a soluble state by the exhibition of the gentlest laxatives.

Tonics and Antispasmodics are here almost exclusively indicated - the cold Bath was highly esteemed among the ancients in this disease, and is still considered serviceable -

Turp. has been recommended on account of its tonic effect by Cullen, its application is attended with many difficulties, nor is its utility ~~fully~~ <sup>fully</sup> established.

Among the vegetable Tonics some have been more highly valued than the Peruvian Bark, and it is particularly serviceable in cases which assume a periodical type, unattended with plethora.

The leaves of the orange tree have been much extolled in Epilepsy - The viscus Guecensis or misetto has been employed <sup>it</sup>.



is said with great advantage, among the olden physicians it enjoyed great reputation; and among those of modern times many of high authority have spoken highly of its employment, but so various and contradictory are the opinions respecting its virtues in Epilepsy, that we are not much disposed to place much reliance in it.

The Mineral Tonics next demand our attention.

The chief of these is silver, it is given in the form of Nitrate or Lunar Caustic. This article of late years has been very highly extolled and numerous cures have been recorded of its great utility Dr Chapman who has tried it repeatedly in Epilepsy makes the following remarks respecting it. "In this City it has been extensively tried, both in private and public practice, as well by other Physicians as myself, and our decision would not be very strongly in its favour. Admitting it to palliate Symptoms, or to protract the return of the paroxysms, this is the extent of what could be said of its effects."

A more singular phenomenon attending its use, is the discoloration of the skin, this is looked upon by some as an evidence of its having made a due impression upon the system - this change in the appearance of the skin does not always occur; nor is it found invariably in



to happen in cases where a cure has been effected. It is also a little remarkable that though exhibited sometimes in large doses, it does not (as we might be led to expect from its great causticity) exercise any deleterious influence upon the coat of the stomach.

Zinc has been used in this stage of the complaint, also Copper in form of Suppur. Acromonistum. Certain forms of Lead particularly the acetate, have afforded much relief - the latter preparation of the Medals was highly esteemed by the late Dr Rush. he gave it in doses of 2 gr 3 times a day with complete success in some cases, and always with manifest advantage.

Iron, Mercury, Antimony, and Arsenic have all been used with reputed benefit in Epilepsy.

Narcotics and Antispasmodics form the next class of remedies which have been chiefly relied on. They are employed either alone, or in combination with some of the Tonics or Astringents. Valerian was formerly believed to possess specific virtues in the complaint, and by the French writers was almost exclusively ~~resorted~~ <sup>employed</sup> in the cure of epilepsy.

The concurrent testimony of numerous and respectable writers

the country for the purpose of examining the various  
points of view, and the various objects of interest  
which it presents. The first object of interest  
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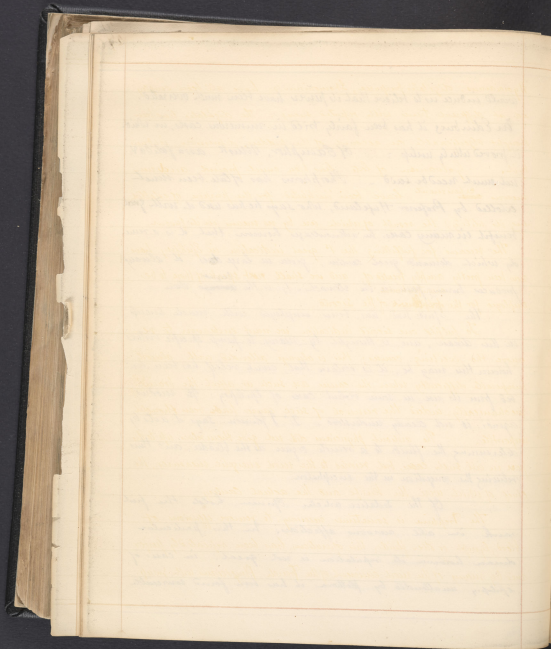
would induce us to believe that its powers have been much overrated.

In Edinburgh it has been fairly tried in numerous cases, in which it proved wholly useless: Of Camphor, *Musk assa foetida* &c.

not much need be said. Phosphorus has of late been much extolled by Professor Hufeland, who says he has used it with great benefit in many cases. he acknowledges however that it is a remedy which demands great caution; given in large doses it always produces burning pain in the stomach. It is the <sup>largest</sup> ~~average~~ dose.

The Spirit: Test: has been employed with much success in this disease, and is thought by many to possess specific virtues. however this may be, it is certain that much relief has been derived from its use, in some violent cases of Epilepsy: Its modus operandi, is not clearly understood - Dr Johnson says it acts by determining the fluids to a remote organ as the bladder, and thus relieving the congestion in the encephalon.

Of the sedative articles Opium holds the first rank in all nervous affections; In this particular disease however its reputation is not great: in cases of epilepsy unattended by plethora it has been found serviceable

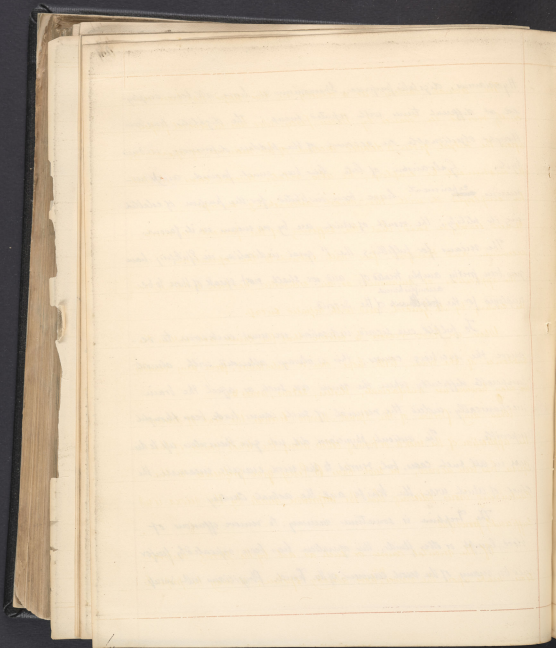


*Hyoscinum*, *digitalis purpurea*, *Stramonium* &c. have all been employed at different times with reputed success: The *digitalis* has been thought objectionable on account of the sudden depression induced by it. Galvanism of late has been much praised, and numerous ~~experiments~~ have been instituted for the purpose of establishing its ability; the result of which are by no means in its favour.

The means for fulfilling the 1<sup>st</sup> great indication in Epilepsy, have now been pretty amply treated of; and we shall next speak of those to be employed for the <sup>accomplishment</sup> ~~fulfillment~~ of the second

To fulfill our second indication we must endeavour to remove the exciting causes; this is always attended with almost insuperable difficulty when the causes are such as affect the brain mechanically, indeed the removal of such causes has been thought impossible. The ancient physicians did not give themselves up to despair in all such cases, but resorted to the most energetic measures, the chief of which were the knife and the actual cautery,

The Trepan is sometimes necessary, to remove effusions of blood, lymph or other fluids; this operation has been repeatedly performed by many of the most eminent of the French Physicians with success.



The actual cautery as a remedy in this stage has been recently revived in France by Baron Percy, who has in several papers upon the subject, given a detailed account of his manner of operating, the instruments he employs, he also relates several cases in which he employed it with the most astonishing success.

It need scarcely be said, that the suffering of the patient is most excessive, and therefore few will submit to the operation.

The application of ammonia as an escharotic, has been substituted for the cautery by M. Gouard, and with repeated success.

When we have reason to believe that the cause act within the substance of the brain, little hope can be entertained, from any remedy. we may however use rubefacients, blisters, setons, issues &c.

When any portion of the Spinal Marrow becomes the seat of disease the application of the moxa, or burning cotton along the whole course of the Spine has been advised, in such cases B. Percy give preference to the cauterizing iron, believing that the impression made by the moxa is not sufficiently powerful.

If the mental cause or such as act by the strong impression made upon the nerves <sup>we</sup> have already spoken; it may be proper to



to above that all such causes should be studiously avoided by the patient.

The Suppression of any evacuation, excessive discharge from any part, melanosis, or retroulsion of any cutaneous disease have been assigned as frequent causes of the disease.

When it is produced by suppression of any discharge, it should be restored by every means in our power - When the evacuation has been excessive and thus induced the disease, we should with equal promptitude endeavor to check it - When the retroulsion of cutaneous affections act as <sup>a</sup> cause, they should be brought out, as soon as possible.

We have stated above that diseases of the alimentary canal give rise very frequently to this complaint, here we should direct our chief attention to the primary affection upon which the Epilepsy depends. The chief of these affections are brought on by acid ingesta in the stomach and bowels, or by the irritation of worms in the primæ viæ.

The principal remedies for this very formidable disease have now been enumerated, to which might have been added numerous other ridiculous and absurd means, recommended and employed at different times, first suggested by the

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crude and superstitious notions formerly entertained about the nature and cause of the disease. Nothing would seem to afford stronger evidence of the indomitable nature of Epilepsy, than the almost interminable list of remedies, various and in some instances opposite in their properties and mode of action, which have been employed to subdue its violence. In conclusion we may remark - that it is only in its mildest forms, and under the most favorable circumstances that we may hope to accomplish a radical and permanent cure.

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